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NEWS	1		Web Page for STN Seminar Schedule - N. America
NEWS	2	AUG 10	Time limit for inactive STN sessions doubles to 40 minutes
NEWS	3	AUG 18	COMPENDEX indexing changed for the Corporate Source (CS) field
NEWS	4	AUG 24	ENCOMPLIT/ENCOMPLIT2 reloaded and enhanced
NEWS	5	AUG 24	CA/CAPLUS enhanced with legal status information for U.S. patents
NEWS	6	SEP 09	50 Millionth Unique Chemical Substance Recorded in CAS REGISTRY
NEWS	7	SEP 11	WPIDS, WPINDEX, and WPIX now include Japanese FTERM thesaurus
NEWS	8	OCT 21	Derwent World Patents Index Coverage of Indian and Taiwanese Content Expanded
NEWS	9	OCT 21	Derwent World Patents Index enhanced with human translated claims for Chinese Applications and Utility Models
NEWS	10	NOV 23	Addition of SCAN format to selected STN databases
NEWS	11	NOV 23	Annual Reload of IFI Databases
NEWS	12	DEC 01	FRFULL Content and Search Enhancements
NEWS	13	DEC 01	DGENE, USGENE, and PCTGEN: new percent identity feature for sorting BLAST answer sets
NEWS	14	DEC 02	Derwent World Patent Index: Japanese FI-TERM thesaurus added
NEWS	15	DEC 02	PCTGEN enhanced with patent family and legal status display data from INPADOCDB
NEWS	16	DEC 02	USGENE: Enhanced coverage of bibliographic and sequence information
NEWS	17	DEC 21	New Indicator Identifies Multiple Basic Patent Records Containing Equivalent Chemical Indexing in CA/CAPLUS
NEWS	18	JAN 12	Match STN Content and Features to Your Information Needs, Quickly and Conveniently
NEWS	19	JAN 25	Annual Reload of MEDLINE database
NEWS	20	FEB 16	STN Express Maintenance Release, Version 8.4.2, Is Now Available for Download
NEWS	21	FEB 16	Derwent World Patents Index (DWPI) Revises Indexing of Author Abstracts
NEWS	22	FEB 16	New FASTA Display Formats Added to USGENE and PCTGEN
NEWS	23	FEB 16	INPADOCDB and INPAFAMDB Enriched with New Content and Features
NEWS	24	FEB 16	INSPEC Adding Its Own IPC codes and Author's E-mail Addresses
NEWS	25	APR 02	CAS Registry Number Crossover Limits Increased to 500,000 in Key STN Databases
NEWS	26	APR 02	PATDPAFULL: Application and priority number formats

L1 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2010 ACS on STN
 RN 220127-57-1 REGISTRY
 ED Entered STN: 03 Mar 1999
 CN Benzamide, 4-[(4-methyl-1-piperazinyl)methyl]-N-[4-methyl-3-[[4-(3-pyridinyl)-2-pyrimidinyl]amino]phenyl]-, methanesulfonate (1:1) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Benzamide, 4-[(4-methyl-1-piperazinyl)methyl]-N-[4-methyl-3-[[4-(3-pyridinyl)-2-pyrimidinyl]amino]phenyl]-, monomethanesulfonate (9CI)

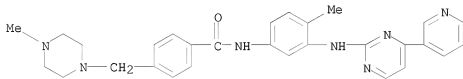
OTHER NAMES:

CN CGP 57148B
 CN Gleevac
 CN Gleevec
 CN Glivec
 CN Imatinib mesilate
 CN Imatinib mesylate
 CN STI 571
 MF C29 H31 N7 O . C H4 O3 S
 CI COM
 SR CA

LC STN Files: ANABSTR, BIOSIS, BIOTECHNO, CA, CAPLUS, CASREACT, CBNB, CHEMCATS, CHEMLIST, CSCHEM, DDFU, DRUGU, EMBASE, HSDB*, IMSPATENTS, IMSRESEARCH, IPA, MRCK*, PATDPASPC, PROUSDDR, PS, RTECS*, SYNTHLINE, TOXCENTER, USPAT2, USPATFULL
 (*File contains numerically searchable property data)

CM 1

CRN 152459-95-5
 CMF C29 H31 N7 O



CM 2

CRN 75-75-2
 CMF C H4 O3 S



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

2947 REFERENCES IN FILE CA (1907 TO DATE)
 29 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
 2958 REFERENCES IN FILE CAPLUS (1907 TO DATE)

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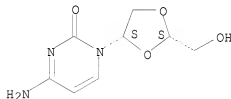
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          1 ODDCS
          2 ODDC
            (ODDC OR ODDCS)
L2      1 L-ODDC
          (L(W)ODDC)

=> d 12

L2  ANSWER 1 OF 1  REGISTRY  COPYRIGHT 2010 ACS on STN
RN  145918-75-8  REGISTRY
ED  Entered STN:  16 Feb 1993
CN  2(1H)-Pyrimidinone, 4-amino-1-[(2S,4S)-2-(hydroxymethyl)-1,3-dioxolan-4-yl]- (CA INDEX NAME)
OTHER CA INDEX NAMES:
CN  2(1H)-Pyrimidinone, 4-amino-1-[2-(hydroxymethyl)-1,3-dioxolan-4-yl]-, (2S-cis)-
OTHER NAMES:
CN  (-)-BCH 204
CN  (-)-OccC
CN  BCH 4556
CN  L-OddC
CN  SPD 758
CN  Troxacitabine
CN  Troxatyl
FS  STEREOSEARCH
MF  C8 H11 N3 O4
CI  COM
SR  CA
LC  STN Files:  ADISINSIGHT, ADISNEWS, AGRICOLA, BEILSTEIN*, BIOSIS,
      BIOTECHNO, CA, CAPLUS, CASREACT, CHEMCATS, CHEMINFORMRX, CIN, EMBASE,
      IMSDRUGNEWS, IMPATENTS, IMSRESEARCH, IPA, MEDLINE, MRCK*, PROMI,
      PROUSDDR, RTECS*, SYNTHLINE, TOXCENTER, USAN, USPAT2, USPATFULL
      (*File contains numerically searchable property data)

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Absolute stereochemistry. Rotation (-).



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

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128 REFERENCES IN FILE CA (1907 TO DATE)
  2 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
128 REFERENCES IN FILE CAPLUS (1907 TO DATE)

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=> file caplus
COST IN U.S. DOLLARS

SINCE FILE TOTAL

	ENTRY	SESSION
FULL ESTIMATED COST	21.68	21.90

FILE 'CAPLUS' ENTERED AT 14:27:56 ON 02 APR 2010
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FILE COVERS 1907 - 2 Apr 2010 VOL 152 ISS 15
FILE LAST UPDATED: 1 Apr 2010 (20100401/ED)
REVISED CLASS FIELDS (/NCL) LAST RELOADED: Dec 2009
USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Dec 2009

Caplus now includes complete International Patent Classification (IPC) reclassification data for the first quarter of 2010.

CAS Information Use Policies apply and are available at:

<http://www.cas.org/legal/infopolicy.html>

This file contains CAS Registry Numbers for easy and accurate substance identification.

=> s l1
L3 2958 L1

=> s l2
L4 128 L2

=> s l3 and l4
L5 14 L3 AND L4

=> dup rem l5
PROCESSING COMPLETED FOR L5
L6 14 DUP REM L5 (0 DUPLICATES REMOVED)

=> s l6 and ad<20021206
L7 14 S L6
4503805 AD<20021206
(AD<20021206)
L8 4 L7 AND AD<20021206

=> d l8 1-4 ibib abs

L8 ANSWER 1 OF 4 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2004:80347 CAPLUS

DOCUMENT NUMBER: 140:122775

TITLE: Treatment of chronic myelogenous leukemia, resistant or intolerant to STI571, involving homoharringtonine alone or combined with other agents

INVENTOR(S): Robin, Jean-pierre; Mahon, Francois-xavier;

PATENT ASSIGNEE(S):
 SOURCE:

Maisonneuve, Herve; Maloysel, Frederick; Blanchard, Julie
 Stragen Pharma S.A., Switz.
 U.S. Pat. Appl. Publ., 18 pp., Cont.-in-part of Appl. No. PCT/IB02/03992.
 CODEN: USXXCO
 Patent
 English
 FAMILY ACC. NUM. COUNT: 2
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 20040019036	A1	20040129	US 2003-397267	20030327
US 6987103	B2	20060117		
WO 2003020252	A2	20030313	WO 2002-IB3992	20020905 <--
WO 2003020252	A3	20030619		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG JP 2009102408 A 20090514 JP 2009-21692 20090202 PRIORITY APPLN. INFO.: US 2001-316967P P 20010905 WO 2002-IB3992 A2 20020905 JP 2003-524561 A3 20020905				

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT
 AB The invention concerns a method of treating chronic myelogenous leukemia, a related myeloproliferative disorder or a Ph-pos. acute lymphocytic leukemia in a subject animal, comprising: (a) selecting or identifying an animal suffering from chronic myelogenous leukemia or a related myeloproliferative disorder and showing resistance or intolerance to treatment with STI571; and (b) administering to the animal homoharringtonine. In a preferred embodiment, the animal is a human.
 OS.CITING REF COUNT: 2 THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD (2 CITINGS)
 REFERENCE COUNT: 23 THERE ARE 23 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 2 OF 4 CAPLUS COPYRIGHT 2010 ACS on STN
 ACCESSION NUMBER: 2003:737931 CAPLUS
 DOCUMENT NUMBER: 139:255332
 TITLE: Method for selecting antitumor drug sensitivity-determining factors and method for predicting antitumor drug sensitivity using the selected factors
 INVENTOR(S): Aoki, Yuko; Hasegawa, Kiyoshi; Ishii, Nobuya; Mori, Kazushige
 PATENT ASSIGNEE(S): F. Hoffmann-La Roche A.-G., Switz.
 SOURCE: PCT Int. Appl., 81 pp.
 CODEN: PIXXD2
 Patent
 English
 FAMILY ACC. NUM. COUNT: 1
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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WO 2003076660	A1	20030918	WO 2002-JP2354	20020313 <--
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
CA 2478640	A1	20030918	CA 2002-2478640	20020313 <--
AU 2002238874	A1	20030922	AU 2002-238874	20020313 <--
EP 1483401	A1	20041208	EP 2002-705127	20020313 <--
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CN 1625602	A	20050608	CN 2002-828958	20020313 <--
JP 2005519610	T	20050707	JP 2003-574857	20020313 <--
US 20050118600	A1	20050602	US 2005-507389	20050120

PRIORITY APPLN. INFO.:

AB Based on drug sensitivity data and extensive gene expression data, a model was constructed by multivariate anal. with the partial least squares method type 1. Further, the model was optimized using modeling power and genetic algorithm. Thereby, the degree of contribution of the resp. genes to drug sensitivity was determined to select genes with a high degree of contribution. In addition, the levels of gene expression in specimens were analyzed, and then the drug sensitivity was predicted based on the model. The predicted values agreed well with those drug sensitivity values determined exptl. The drug sensitivity-predicting method provided by the present invention enables assessment of the effectiveness of a drug prior to administration using small quantities of specimens associated with diseases such as cancer. Since this enables the selection of the most suitable drug for each patient, the present invention is very useful in improving a patient's quality of life (QOL).

OS.CITING REF COUNT: 5 THERE ARE 5 CAPLUS RECORDS THAT CITE THIS RECORD (5 CITINGS)

REFERENCE COUNT: 9 THERE ARE 9 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 3 OF 4 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2003:356264 CAPLUS

DOCUMENT NUMBER: 138:348696

TITLE: Pharmaceutical compositions for the treatment of leukemia comprising dioxolane nucleosides analogs

INVENTOR(S): Jolivet, Jacques; Giles, Francis J.; Kantarjian, Hagop

PATENT ASSIGNEE(S): Shire Biochem Inc., Can.

SOURCE: PCT Int. Appl., 37 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003037344	A1	20030508	WO 2002-CA1687	20021104 <--
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ,			

UA, UG, US, UZ, VN, YU, ZA, ZM, ZW
 RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,
 KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,
 FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR, BF, BJ, CF,
 CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

CA 2465682 A1 20030508 CA 2002-2465682 20021104 <--
 AU 2002336864 A1 20030512 AU 2002-336864 20021104 <--
 AU 2002336864 B2 20060817
 US 20030125305 A1 20030703 US 2002-286960 20021104 <--
 US 6645972 B2 20031111
 EP 1441733 A1 20040804 EP 2002-771956 20021104 <--
 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
 IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK
 JP 2005512984 T 20050512 JP 2003-539687 20021104 <--
 PRIORITY APPLN. INFO.: US 2001-330891P P 20011102
 WO 2002-CA1687 W 20021104

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT
 OTHER SOURCE(S): MARPAT 138:348696

AB The present invention provides a novel method for treating leukemia in a
 host that has been previously treated with a Bcr-Abl tyrosine kinase
 inhibitor comprising administering to the host a therapeutically effective
 amount of a dioxolane nucleoside analog.

OS.CITING REF COUNT: 3 THERE ARE 3 CAPLUS RECORDS THAT CITE THIS RECORD
 (3 CITINGS)

REFERENCE COUNT: 6 THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 4 OF 4 CAPLUS COPYRIGHT 2010 ACS on STN
 ACCESSION NUMBER: 2003:202456 CAPLUS
 DOCUMENT NUMBER: 138:231710
 TITLE: Treatment of chronic myelogenous leukemia, resistant
 or intolerant to STI571, involving homoharringtonine
 alone or combined with other agents

INVENTOR(S): Robin, Jean-Pierre; Mahon, Francois-Xavier;
 Maisonneuve, Herve; Maloisel, Frederick; Blanchard,
 Julie

PATENT ASSIGNEE(S): Oncopharm Corporation, USA
 SOURCE: PCT Int. Appl., 41 pp.
 CODEN: PIXXD2

DOCUMENT TYPE: Patent
 LANGUAGE: English
 FAMILY ACC. NUM. COUNT: 2
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003020252	A2	20030313	WO 2002-IB3992	20020905 <--
WO 2003020252	A3	20030619		
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,				
CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH,				
GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,				
LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH,				
PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ,				
UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,				
KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,				
FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR, BF, BJ, CF,				
CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
CA 2459822	A1	20030313	CA 2002-2459822	20020905 <--
AU 2002337410	A1	20030318	AU 2002-337410	20020905 <--
EP 1443933	A2	20040811	EP 2002-772653	20020905 <--
EP 1443933	B1	20091209		

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
 IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK
 JP 2005508896 T 20050407 JP 2003-524561 20020905 <--
 AT 451106 T 20091215 AT 2002-772653 20020905 <--
 US 20040019036 A1 20040129 US 2003-397267 20030327
 US 6987103 B2 20060117
 JP 2009102408 A 20090514 JP 2009-21692 20090202
 PRIORITY APPLN. INFO.: US 2001-316967P P 20010905
 JP 2003-524561 A3 20020905
 WO 2002-1B3992 W 20020905

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

AB The present invention concerns a method of treating chronic myelogenous leukemia (CML), a related myeloproliferative disorder or a Ph-pos. acute lymphocytic leukemia in a subject animal, comprising: (a) selecting or identifying an animal suffering from chronic myelogenous leukemia or a related myeloproliferative disorder and showing resistance or intolerance to treatment with STI571; and (b) administering to the animal homoharringtonine. In a preferred embodiment, the animal is a human being. Significant sensitivity to homoharringtonine was observed in progenitors from patients relapsing on STI571 therapy both before and after relapse,, strongly implying that in CML blast crisis cells refractory to STI751 there is no significant cross-resistance to homoharringtonine.

OS.CITING REF COUNT: 4 THERE ARE 4 CAPLUS RECORDS THAT CITE THIS RECORD
 (4 CITINGS)

=> file medline embase biosis

COST IN U.S. DOLLARS	SINCE FILE	TOTAL
	ENTRY	SESSION
FULL ESTIMATED COST	15.71	37.61
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE	TOTAL
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CA SUBSCRIBER PRICE	-3.40	-3.40

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COST IN U.S. DOLLARS	SINCE FILE	TOTAL
	ENTRY	SESSION
FULL ESTIMATED COST	3.33	40.94
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE	TOTAL
	ENTRY	SESSION
CA SUBSCRIBER PRICE	0.00	-3.40

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SEL L1 1- CHEM
L9 SEL L1 1- CHEM : 8 TERMS

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COST IN U.S. DOLLARS	SINCE FILE	TOTAL
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FULL ESTIMATED COST	15.49	56.43
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE	TOTAL
	ENTRY	SESSION
CA SUBSCRIBER PRICE	0.00	-3.40

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FILE 'EMBASE' ENTERED AT 14:29:26 ON 02 APR 2010
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FILE 'BIOSIS' ENTERED AT 14:29:26 ON 02 APR 2010
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L10 21461 L9

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	ENTRY	SESSION
FULL ESTIMATED COST	3.33	59.76
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	ENTRY	SESSION
CA SUBSCRIBER PRICE	0.00	-3.40

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L11 SEL L2 1- CHEM : 8 TERMS

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COST IN U.S. DOLLARS	SINCE FILE	TOTAL
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DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE ENTRY	TOTAL SESSION
CA SUBSCRIBER PRICE	0.00	-3.40

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S L11

L12 519 L11

=> s l10 and l12

L13 65 L10 AND L12

=> s l13 and pd<20021206

1 FILES SEARCHED...

L14 13 L13 AND PD<20021206

=> dup rem l14

PROCESSING COMPLETED FOR L14

L15 11 DUP REM L14 (2 DUPLICATES REMOVED)

=> d l15 1-11 ibib abs

L15 ANSWER 1 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2002047444 EMBASE

TITLE: Phase II study of troxacitabine, a novel dioxolane nucleoside analog, in patients with refractory leukemia.

AUTHOR: Giles, Francis J., Dr. (correspondence); Garcia-Manero, Guillermo; Cortes, Jorge E.; Baker, Sharyn D.; Miller, Carol B.; O'Brien, Susan M.; Thomas, Deborah A.; Andreeff, Michael; Bivins, Carol; Jolivet, Jacques; Kantarjian, Hagop M.

CORPORATE SOURCE: University of Texas, M.D. Anderson Cancer Center, Department of Leukemia, 1400 Holcombe Blvd, Houston, TX 77030, United States. fgiles@mdanderson.org

SOURCE: Journal of Clinical Oncology, (1 Feb 2002) Vol. 20, No. 3, pp. 656-664.

Refs: 43

ISSN: 0732-183X CODEN: JCONDN

COUNTRY: United States

DOCUMENT TYPE: Journal, Article

FILE SEGMENT: 016 Cancer
025 Hematology
030 Clinical and Experimental Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 21 Feb 2002

Last Updated on STN: 21 Feb 2002

AB Purpose: To investigate the activity of a novel dioxolane L-nucleoside analog, troxacitabine (L-(-)-OddC,

BCH-4556), in patients with refractory leukemia. Patients and Methods: Study participants were patients with refractory or relapsed acute myeloid (AML) or lymphocytic (ALL) leukemia, myelodysplastic syndromes (MDS), or chronic myelogenous leukemia in blastic phase (CML-BP). Troxacitabine was provided as an intravenous infusion for more than 30 minutes daily for 5 days at a dose of 8.0 mg/m²/d (40 mg/m² per course). Courses were given every 3 to 4 weeks according to antileukemic efficacy. Results: Forty-two patients (AML, 18 patients; MDS, one patient; ALL, six patients; CML-BP, 17 patients) were treated. Median age was 51 years (range, 23 to 80 years); 22 patients were male. Stomatitis was the most significant adverse event, with three patients (7%) and two patients (5%), respectively, experiencing grade 3 or 4 toxicity. Ten patients (24%) had grade 3 hand-foot syndrome, and two patients (5%) had grade 3 skin rash. One patient (2%) had grade 3 fatigue and anorexia. Marrow hypoplasia occurred between days 14 and 28 in 12 (75%) of 16 assessable patients with AML. Two complete remissions and one partial remission (18%) were observed in 16 assessable patients with AML. None of six patients with ALL responded. Six (37%) of 16 assessable patients with CML-BP experienced a return to chronic-phase disease. Conclusion: Troxacitabine has significant antileukemic activity in patients with AML and CML-BP. .COPYRG. 2002 by American Society of Clinical Oncology.

L15 ANSWER 2 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 200227269 EMBASE
 TITLE: Troxacitabine-based therapy of refractory leukemia.
 AUTHOR: Giles, Francis J., Dr. (correspondence)
 CORPORATE SOURCE: Section of Develop. Therapeutics, Univ. of TX M.D. Anderson Cancer Ctr, Department of Leukemia, 1515 Holcombe Boulevard, Houston, TX 77030-4095, United States. fgiles@mdanderson.org
 SOURCE: Expert Review of Anticancer Therapy, (2002) Vol. 2, No. 3, pp. 261-266.
 Refs: 38
 ISSN: 1473-7140 CODEN: ERATBJ
 COUNTRY: United Kingdom
 DOCUMENT TYPE: Journal; Article
 FILE SEGMENT: 016 Cancer
 025 Hematology
 030 Clinical and Experimental Pharmacology
 037 Drug Literature Index
 038 Adverse Reactions Titles
 LANGUAGE: English
 SUMMARY LANGUAGE: English
 ENTRY DATE: Entered STN: 11 Jul 2002
 Last Updated on STN: 11 Jul 2002

AB Unique among currently approved or in-development nucleoside analogs, troxacitabine (Troxacitabine) is an L-nucleoside with significant cytotoxic activity. Its stereochemistry and cellular transport characteristics render it insensitive to some tumor cell mechanisms of resistance to D-nucleosides, such as cytarabine and fludarabine. Troxacitabine's dose-limiting toxicities were mucositis and hand-foot syndrome in patients with refractory leukemia. Three complete and one partial remissions were observed in 30 patients with refractory acute myeloid leukemia on a Phase I study. Significant activity in blastic phase of chronic myeloid leukemia was seen on a Phase II study. Combinations of troxacitabine with ara-C, topotecan and idarubicin are active in patients with refractory acute myeloid leukemia (AML). Phase II studies in patients with refractory lymphoproliferative diseases are ongoing. Troxacitabine merits

further study in patients with hematological malignancies.

L15 ANSWER 3 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2002367914 EMBASE
TITLE: Troxacitabine activity in extramedullary myeloid leukemia.
AUTHOR: Alvarado, Y.Yesid; Kantarjian, Alvarado M.; Cortes, Jorge E.; Apostolidou, Efrosynl; Bivins, Carol; Giles, Francis J. (correspondence)
CORPORATE SOURCE: Department of Leukemia, M.D. Anderson Cancer Center, The University of Texas, 1400 Holcombe Boulevard, Houston, TX 77030, United States. frankgiles@aol.com
SOURCE: Hematology, (2002) Vol. 7, No. 3, pp. 179-185.
Refs: 36
ISSN: 1024-5340 CODEN: HMATFL
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 016 Cancer
025 Hematology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
ENTRY DATE: Entered STN: 7 Nov 2002
Last Updated on STN: 7 Nov 2002

AB Troxacitabine is a novel L-enantiomer nucleoside analog with unique properties in terms of its structure, pharmacokinetics, intracellular transport, and susceptibility to mechanisms of resistance. Troxacitabine has significant activity in patients with refractory myeloid leukemias, both as a single agent and when combined with standard anti-leukemia agents. In a cohort of 170 patients with refractory myeloid leukemia treated with troxacitabine-based regimens on Phase 1 or 2 studies, 10 (6%) had biopsy-proven extramedullary disease, either with or without bone marrow involvement. Six of these patients who received single-agent troxacitabine, 4 received a combination of troxacitabine and cytarabine. Complete response and disappearance of all extramedullary lesions were observed in 6 (60%) of these 10 patients. Two of the 6 responding patients relapsed within 3 months, 2 patients had remissions of 8 and 9 months duration, respectively, 1 patient is in on-going remission at 3, and 1 patient is lost to follow-up. Troxacitabine-based therapy had significant antileukemic activity in extramedullary myeloid leukemias and warrants further investigation in this clinical situation.

L15 ANSWER 4 OF 11 MEDLINE on STN DUPLICATE 1
ACCESSION NUMBER: 2002345081 MEDLINE
DOCUMENT NUMBER: PubMed ID: 12087878
TITLE: Gateways to Clinical Trials.
AUTHOR: Bayes M; Rabasseda X; Prous J R
SOURCE: Methods and findings in experimental and clinical pharmacology, (2002 Apr) Vol. 24, No. 3, pp. 159-84. Ref: 150
Journal code: 7909595. ISSN: 0379-0355. L-ISSN: 0379-0355.
PUB. COUNTRY: Spain
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 200301
ENTRY DATE: Entered STN: 29 Jun 2002
Last Updated on STN: 11 Jan 2003

Entered Medline: 10 Jan 2003

AB Gateways to Clinical Trials is a guide to the most recent clinical trials in current literature and congresses. The data in the following tables has been retrieved from the Clinical Studies knowledge area of Prous Science Integrity, the world's first drug discovery and development portal, and provides information on study design, treatments, conclusions and references. This issue focuses on the following selection of drugs: Abiciximab, acetylcholine chloride, acetylcysteine, alefacept, alemtuzumab, alicaforsen, alteplase, aminopterin, amoxicillin sodium, amphotericin B, anastrozole, argatroban monohydrate, arsenic trioxide, aspirin, atazanavir, atorvastatin, augmerosen, azathioprine; Benzylpenicillin, BMS-284756, botulinum toxin type A, botulinum toxin type B, BQ-123, budesonide, BXT-51072; Calcium folinate, carbamazepine, carboplatin, carmustine, ceftriaxone sodium, cefuroxime axetil, chorionic gonadotropin (human), cimetidine, ciprofloxacin hydrochloride, cisplatin, citalopram hydrobromide, cladribine, clarithromycin, clavulanic acid, clofarabine, clopidogrel hydrogensulfate, clotrimazole, CNI-1493, colessevelam hydrochloride, cyclophosphamide, cytarabine; Dalteparin sodium, daptomycin, darbepoetin alfa, debrisoquine sulfate, dexrazoxane, diaziquone, didanosine, docetaxel, donepezil, doxorubicin hydrochloride liposome injection, DX-9065a; Eberconazole, ecogromostim, eletriptan, enoxaparin sodium, epoetin, epoprostenol sodium, erlizumab, ertapenem sodium, ezetimibe; Fampridine, fenofibrate, filgrastim, fluconazole, fludarabine phosphate, fluorouracil, 5-fluorouracil/epinephrine, fondaparinux sodium, formoterol fumarate; Gabapentin, gemcitabine, gemfibrozil, glatiramer; Heparin sodium, homoharringtonin; Ibuprofen, iloprost, imatinib mesilate, imiquimod, interferon alpha-2b, interferon alpha-2c, interferon-beta; KW-6002; Lamotrigine, lanoteplase, metoprolol tartrate, mitoxantrone hydrochloride; Naproxen sodium, naratriptan, Natalizumab, nelfinavir mesilate, nevirapine, nifedipine, NSC-683864; Oral heparin; Paclitaxel, peginterferon alfa-2b, phenytoin, pimecrolimus, piperacillin, pleconaril, pramipexole hydrochloride, prednisone, pregabalin, progesterone; Rasburicase, ravaconazole, reteplase, ribavirin, rituximab, rizatriptan, rosiglitazone maleate, rotigotine; Semaxanib, sildenafil citrate, simvastatin, stavudine, sumatriptan; Tacrolimus, tamoxifen citrate, tanomastat, tazobactam, telithromycin, tenecteplase, tolafentrine, tolterodine tartrate, triamcinolone acetanide, trimetazidine, troxacitabine; Valproic acid, vancomycin hydrochloride, vincristine, voriconazole, Warfarin sodium; Ximelagatran, Zidovudine, zolmitriptan.

L15 ANSWER 5 OF 11 MEDLINE on STN DUPLICATE 2
ACCESSION NUMBER: 2002687859 MEDLINE
DOCUMENT NUMBER: PubMed ID: 12446421
TITLE: Chronic myelogenous leukemia.
AUTHOR: Druker Brian J; O'Brien Stephen G; Cortes Jorge; Radich Jerald
CORPORATE SOURCE: University of Newcastle, Royal Victoria Infirmary, Newcastle Upon Tyne, United Kingdom.
SOURCE: Hematology / the Education Program of the American Society of Hematology. American Society of Hematology. Education Program, (2002) pp. 111-35. Ref: 173
Journal code: 100890099. ISSN: 1520-4391. L-ISSN: 1520-4383.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
(RESEARCH SUPPORT, NON-U.S. GOV'T)
(RESEARCH SUPPORT, U.S. GOV'T, P.H.S.)
General Review; (REVIEW)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 200308

ENTRY DATE: Entered STN: 14 Dec 2002
Last Updated on STN: 28 Aug 2003
Entered Medline: 27 Aug 2003

AB The treatment options for chronic myelogenous leukemia (CML) continue to evolve rapidly. Imatinib mesylate (Gleevec, Glivec, formerly STI571) has continued to show remarkable clinical benefits and the updated results with this agent are reviewed. As relapses using single agent imatinib have occurred, particularly in advanced phase patients, the issue of whether combinations of other antileukemic agents with imatinib may yield improved results is addressed. In addition, data on new agents that have potential in the treatment of CML are reviewed. These agents are presented in the context of their molecular mechanism of action. The most recent data for stem cell transplantation, along with advances in nonmyeloablative transplants, are also reviewed. In Section I, Drs. Stephen O'Brien and Brian Druker update the current status of clinical trials with imatinib and review ongoing investigations into mechanisms of resistance and combinations of imatinib with other agents. They also present their views on integration of imatinib with other therapies. In Section II, Dr. Jorge Cortes describes the most recent data on novel therapies for CML, including farnesyl transferase inhibitors, arsenic trioxide, decitabine, and troxatyl, among others. These agents are discussed in the context of their molecular mechanism of action and rationale for use. In Section III, Dr. Jerald Radich updates the results of stem cell transplants for CML, including emerging data on nonmyeloablative transplants. He also presents data on using microarrays to stratify patients into molecularly defined risk groups.

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ACCESSION NUMBER: 2002369569 EMBASE
TITLE: STI-571 in chronic myelogenous leukaemia.
AUTHOR: Tsao, Anne S.; Kantarjian, Hagop; Talpaz, Moshe (correspondence)
CORPORATE SOURCE: Department of Bioimmunotherapy, MD Anderson Cancer Center, Box 422, 1515 Holcombe Blvd., Houston, TX 77030, United States. mtalpaz@mdanderson.org
SOURCE: British Journal of Haematology, (2002) Vol. 119, No. 1, pp. 15-24.
Refs: 72
ISSN: 0007-1048 CODEN: BJHEAL
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 016 Cancer
025 Hematology
030 Clinical and Experimental Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
ENTRY DATE: Entered STN: 31 Oct 2002
Last Updated on STN: 31 Oct 2002

L15 ANSWER 7 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2002320865 EMBASE
TITLE: Chronic myeloid leukemia: Current therapies and the potential role of farnesyltransferase inhibitors.
AUTHOR: Keating, Armand, Dr. (correspondence)
CORPORATE SOURCE: Princess Margaret Hospital, 610 University Ave, Toronto, Ont. M5G 2M9, Canada.
SOURCE: Seminars in Hematology, (Jul 2002) Vol. 39, No. 3

SUPPL. 2, pp. 11-17.

Refs: 59

ISSN: 0037-1963 CODEN: SEHEA3

COUNTRY: United States

DOCUMENT TYPE: Journal; Article

FILE SEGMENT: 016 Cancer

025 Hematology

037 Drug Literature Index

038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

ENTRY DATE: Entered STN: 3 Oct 2002

Last Updated on STN: 3 Oct 2002

AB The treatment of patients with chronic myeloid leukemia (CML) is evolving rapidly. With conventional chemotherapy the clinical course is characterized by a chronic phase (median duration, 4 to 5 years), followed by an accelerated phase with transition to a terminal blast crisis. Treatment with busulfan or hydroxyurea does not alter the natural history. Interferon alfa (IFN- α) prolongs life expectancy by approximately 20 months but is associated with significant toxicity. Evidence indicates that bone marrow transplantation from a related human leukocyte antigen (HLA)-identical donor can be curative in younger patients. However, transplantation is available to only a minority of patients and entails severe toxicity and transplant-related mortality. Dramatic advances in the understanding of the molecular pathophysiology of CML have led to a new era of targeted therapy. The specific tyrosine kinase inhibitor imatinib mesylate demonstrates a high level of efficacy in CML with acceptable toxicity. Farnesyltransferase inhibitors (FTIs) are another important class of targeted agents with the potential to act at multiple sites within dysregulated signal transduction networks. ZARNESTRA® (formerly R115777, Ortho Biotech Oncology, Raritan, NJ), an oral FTI, has shown activity and is well tolerated in both chronic- and accelerated-phase patients. With their mechanistic specificity, the new modalities offer the promise of increased antileukemic activity and an improved therapeutic index. Copyright 2002, Elsevier Science (USA). All rights reserved.

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ACCESSION NUMBER: 2002320863 EMBASE

TITLE: Assessing the future landscape in myeloid malignancies: Evolving insights on farnesyltransferase inhibitors: Introduction.

AUTHOR: Rosenblatt, Joseph D, Dr. (correspondence); Rowe, Jacob M

CORPORATE SOURCE: Hematology-Oncology Division, University of Miami, Sylvester Comprehensive Cancer Center, Miami, FL, United States.

AUTHOR: Rowe, Jacob M

CORPORATE SOURCE: Department of Hematology and Bone Marrow Transplantation, Rambam Medical Center Bat Galim, Haifa, Israel.

AUTHOR: Rowe, Jacob M

CORPORATE SOURCE: Hematology-Oncology Division, University of Miami, Sylvester Comprehensive Cancer Center, 1475 NW 12th Ave, Miami, FL 33136, United States.

AUTHOR: Rosenblatt, Joseph D, Dr. (correspondence)

CORPORATE SOURCE: Hematology-Oncology Division, University of Miami, Sylvester Comprehensive Cancer Center, 1475 NW 12th Ave, Miami, FL 33136, United States.

SOURCE: Seminars in Hematology, (Jul 2002) Vol. 39, No. 3 SUPPL. 2, pp. 1-3.

Refs: 1

ISSN: 0037-1963 CODEN: SEHEA3

COUNTRY: United States
DOCUMENT TYPE: Journal; Editorial
FILE SEGMENT: 016 Cancer
025 Hematology
037 Drug Literature Index
LANGUAGE: English
ENTRY DATE: Entered STN: 3 Oct 2002
Last Updated on STN: 3 Oct 2002

L15 ANSWER 9 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN

ACCESSION NUMBER: 2001380875 EMBASE
TITLE: Chronic myelogenous leukemia.
AUTHOR: Kalidas, M.; Kantarjian, H.; Talpaz, M., Dr.
(correspondence)
CORPORATE SOURCE: Department of Bioimmunotherapy, M.D. Anderson Cancer Center, Box 422, 1515 Holcombe Blvd, Houston, TX 77030, United States. mtalpaz@mail.mdanderson.org
SOURCE: Journal of the American Medical Association, (22 Aug 2001) Vol. 286, No. 8, pp. 895-898.
Refs: 48
ISSN: 0098-7484 CODEN: JAMAAP

COUNTRY: United States
DOCUMENT TYPE: Journal; General Review; (Review)
FILE SEGMENT: 016 Cancer
025 Hematology
037 Drug Literature Index
038 Adverse Reactions Titles
005 General Pathology and Pathological Anatomy
LANGUAGE: English
ENTRY DATE: Entered STN: 15 Nov 2001
Last Updated on STN: 15 Nov 2001

L15 ANSWER 10 OF 11 BIOSIS COPYRIGHT (c) 2010 The Thomson Corporation on STN

ACCESSION NUMBER: 2002:152475 BIOSIS
DOCUMENT NUMBER: PREV200200152475
TITLE: Phase II study of TroxatylTM in patients with chronic myeloid leukemia in blastic phase (CML-BP).
AUTHOR(S): Giles, Francis [Reprint author]; Feldman, Eric; Cortes, Jorge [Reprint author]; Faderl, Stefan [Reprint author]; Larson, Richard; Mamus, Steven; Thomas, Deborah [Reprint author]; Garcia-Manero, Guillermo [Reprint author]; O'Brien, Susan [Reprint author]; Beran, Milsolav [Reprint author]; Talpaz, Moshe [Reprint author]; Kantarjian, Hagop [Reprint author]
CORPORATE SOURCE: UT MD Anderson Cancer Center, Houston, TX, USA
SOURCE: Blood, (November 16, 2001) Vol. 98, No. 11 Part 2, pp. 258b. print.
Meeting Info.: 43rd Annual Meeting of the American Society of Hematology, Part 2. Orlando, Florida, USA. December 07-11, 2001. American Society of Hematology.
CODEN: BLOOAW. ISSN: 0006-4971.

DOCUMENT TYPE: Conference; (Meeting)
Conference; Abstract; (Meeting Abstract)
LANGUAGE: English
ENTRY DATE: Entered STN: 21 Feb 2002
Last Updated on STN: 26 Feb 2002

AB Troxatyl triphosphate (converted by the intracellular phosphorylation of Troxatyl) is a potent inhibitor and chain terminator for human cellular DNA polymerases and was a unique pattern of cellular uptake and metabolism. On a Phase I study, Troxatyl

had significant antileukemia activity in patients with refractory disease. (Giles et al, JCO: 19:762:2001). The recommended single agent dose was defined as 8 mg/m²/day daily for 5 days. On a subsequent Phase II study, 6 patients with CML-BP of 16 evaluable (37%) achieved a return to chronic phase disease. (Giles et al, JCO: In press). Three of the 6 responding patients received Troxatyl as first therapy for CML-BP; one patient had failed STI571 as prior sole therapy for CML-BP. A multicenter Phase II study of Troxatyl 8 mg/m²/day daily for 5 days for patients with CML-BP who have received no prior chemotherapy for CML-BP is being conducted. Patients who have received Gleevec therapy as sole prior therapy for CML-BP are also eligible. Twenty-six patients, 17 male, 26 performance score ltoreq2, median age 54 years (range 31-84) have been entered on study to date, 13 (50%) patients received Troxatyl as first therapy for CML-BP, 13 (50%) had failed prior Gleevec therapy for CML-BP. Response definitions are as follows: Complete hematologic response (CHR) requires normalization of peripheral counts and differentials with ltoreq5% marrow blasts for at least 4 weeks. Hematologic improvement (HI) is as with CHR but with persistence of thrombocytopenia less than 100X10⁹/L and few immature peripheral cells. A partial hematologic response (PHR) is as per CHR, but allows persistence of, though gtoreq50% reduction of, palpable splenomegaly and thrombocytosis (platelets>450X10⁹/L), or the presence of few immature peripheral cells. Back to second chronic phase (BCP) requires disappearance of BP features and return to chronic phase CML features, i.e., peripheral blasts <15%, peripheral blasts+promyelocytes <30%, peripheral basophils <20%, and platelets >100X10⁹/L. In patients with extramedullary disease (EMD), complete response (CR) requires CHR plus disappearance of all EMD. PR in patients with EMD require at least a 50% reduction in all EMD. Twenty-one patients who have received a total of 40 cycles (range 1 to 4) of Troxatyl therapy are currently evaluable for response - 1 PR, 1 HI, 1 BCP, and 1 CR in a patient with EMD have been recorded to date. Four patients died during cycle 1 of therapy - one with a CVA, 3 with sepsis/progressive disease. Extramedullary grade 3 or 4 attributable adverse events in the first cycle of therapy included skin rash (3), hyperbilirubinemia (3), hand foot syndrome (1), colitis (1). One patient developed Sweets Syndrome during 1st cycle of therapy - this subsequently completely resolved. Median survival in the study cohort is 9 months with 33% of patients alive at 1 year. Troxatyl has significant activity in patients with CML-BP. Accrual continues on this study.

L15 ANSWER 11 OF 11 EMBASE COPYRIGHT (c) 2010 Elsevier B.V. All rights reserved on STN
 ACCESSION NUMBER: 2001169089 EMBASE
 TITLE: Latest advances from basic and clinical research in hematology.
 AUTHOR: Diaz-Ricart, M., Dr. (correspondence)
 CORPORATE SOURCE: Hemotherapy Dept. of the Hosp. Clin., IDIBAPS, Villarroel 170, 08036 Barcelona, Spain.
 SOURCE: Drug News and Perspectives, (2001) Vol. 14, No. 1, pp. 50-53.
 ISSN: 0214-0934 CODEN: DNPEED
 COUNTRY: Spain
 DOCUMENT TYPE: Journal; Conference Article; (Conference paper)
 FILE SEGMENT: 016 Cancer
 025 Hematology
 037 Drug Literature Index
 LANGUAGE: English
 SUMMARY LANGUAGE: English
 ENTRY DATE: Entered STN: 7 Jun 2001
 Last Updated on STN: 7 Jun 2001
 AB New treatments in hematological malignancies were a focal point of

sessions and presentations at the 42nd Annual Meeting of the American Society of Hematology, held December 1-5, 2000, in San Francisco, California, U.S.A. The meeting also provided discussion on pathogen inactivation in blood banking, stem cell transplantation in leukemia as well as nonmalignant diseases, the reparative potential of stem cells, a new oral antithrombotic therapy and a new class of highly selective factor Xa inhibitors. .COPYRG.T. 2001 Prous Science.

=> d his

(FILE 'HOME' ENTERED AT 14:26:35 ON 02 APR 2010)

FILE 'REGISTRY' ENTERED AT 14:26:51 ON 02 APR 2010

L1 1 S STI 571/CN
L2 1 S L-ODDC

FILE 'CAPLUS' ENTERED AT 14:27:56 ON 02 APR 2010

L3 2958 S L1
L4 128 S L2
L5 14 S L3 AND L4
L6 14 DUP REM L5 (0 DUPLICATES REMOVED)
L7 14 S L6
L8 4 S L6 AND AD<20021206

FILE 'MEDLINE, EMBASE, BIOSIS' ENTERED AT 14:29:19 ON 02 APR 2010

FILE 'REGISTRY' ENTERED AT 14:29:25 ON 02 APR 2010

SET SMARTSELECT ON
L9 SEL L1 1- CHEM : 8 TERMS
SET SMARTSELECT OFF

FILE 'MEDLINE, EMBASE, BIOSIS' ENTERED AT 14:29:26 ON 02 APR 2010

L10 21461 S L9

FILE 'REGISTRY' ENTERED AT 14:29:32 ON 02 APR 2010

SET SMARTSELECT ON
L11 SEL L2 1- CHEM : 8 TERMS
SET SMARTSELECT OFF

FILE 'MEDLINE, EMBASE, BIOSIS' ENTERED AT 14:29:32 ON 02 APR 2010

L12 519 S L11
L13 65 S L10 AND L12
L14 13 S L13 AND PD<20021206
L15 11 DUP REM L14 (2 DUPLICATES REMOVED)

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---Logging off of STN---

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Executing the logoff script...

=> LOG Y

COST IN U.S. DOLLARS	SINCE FILE	TOTAL
FULL ESTIMATED COST	ENTRY	SESSION
	40.84	116.09

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE ENTRY	TOTAL SESSION
CA SUBSCRIBER PRICE	0.00	-3.40

STN INTERNATIONAL LOGOFF AT 14:32:06 ON 02 APR 2010